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| 5514 | 7590 | 05/01/2007 |

FITZPATRICK CELLA HARPER & SCINTO
30 ROCKEFELLER PLAZA
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/606,247	06/26/2003	Tetsuji Ogawa	03560.003327.	4501

TITLE OF INVENTION: OPHTHALMOLOGIC APPARATUS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	$1400	$300	$0	$1700	08/01/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHOI, WILLIAM C	2873	351-206000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

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Fitzpatrick, Cella, Harper & Scinto
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE
CANON KABUSHIKI KAISHA

(B) RESIDENCE: (CITY and STATE OR COUNTRY)
TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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5. **Change in Entity Status** (from status indicated above)
☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature _____   Date ___**June 1, 2007**___

Typed or printed name ___**Douglas W. Pinsky**___   Registration No. ___**46,994**___

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